

Request for Disbursement (RFD)**Instructions and Checklist**

HCD DFA EHAP-3 (New 6/07)

Emergency Housing and Assistance Program (EHAP) Operating Facility Grants

Request for Disbursement (RFD) Instructions and Checklist

- Use the current EHAP RFD form, which can be obtained from the EHAP Operating Facility Grants webpage: www.hcd.ca.gov/fa/ehap. Under Program Publications click on the EHAP Forms link to access the RFD form.
- If you have a Designated Local Board (DLB) that requires DLB pre-approval of RFDs, first contact the DLB to obtain the DLB's RFD form and instructions.
- Confirm the effective date and expiration date of your EHAP Standard Agreement (contract). The effective date is the stamped date in the lower right hand corner of page one of your contract.
- Confirm the RFD includes only expenditures that are approved and eligible under your contract and the EHAP Regulations. Review Exhibit A of your contract to confirm the approved contract expenditures and activities.
- Review Exhibit J-the Operations Detail that was submitted with your application. The approved line items and their amounts are the only expenses that can be charged to this grant under the "Operations" activity. Any changes to these amounts must be done through a budget revision.
- Confirm the final RFD includes only expenditures incurred before the expiration date of the contract. (All EHAP Operations contracts expire 14 months from the effective date of the contract and cannot be extended.)
- Confirm that sufficient detail has been submitted to support the totals on Page 3 of the RFD. Itemize the specific bills paid (or percentages thereof) for which reimbursement from the EHAP grant is requested. Identify the period covered by each bill (e.g., counselor Joe Doe's salary for June 1 – 15, 2007; water bill for April 13 – May 12, 2007). Staff for which reimbursement is requested must be listed by name and position title. Be sure that each expense item is identified by check number, date and amount and that all totals have been rounded to the nearest dollar. (DO NOT USE CENTS.)
- Confirm that the RFD has identified: expenditures by contract activity; subtotals by contract activity; and a grand total that equals the EHAP funds request listed on Page 1 of the RFD. If the expenditure detail is more than four pages, please submit a one-page summary of the activity totals. Computer spreadsheets and/or adding machine tapes are acceptable.
- A current Certificate of Liability Insurance for the shelter site(s) must be submitted with each RFD, including an Advance Request. The Department of Housing and Community Development must appear on the Certificate of Insurance as an additional insured along with the contract number of the EHAP grant.
- Confirm that the required Semi-Annual Reports (SARs) have been submitted to HCD.
- Confirm that Page 1 of the RFD includes the original signatures of the Fiscal Officer and the Authorized Representative.

RFD Checklist

- _____ Special conditions, if any, have been met.
- _____ Current Insurance certificate has been submitted (and includes EHAP contract number and names HCD as additional insured)
- _____ SAR #1 submitted?

SAR 1: Month 1 through 7 of the Standard Agreement
(SAR 1 report due 30 days from end of reporting period)
- _____ SAR #2 submitted?

SAR 2: Month 8 through 14 of the Standard Agreement
(SAR 2 report due 30 days from end of reporting period)
- _____ Documentation sufficient (**expenditure detail**) to cover advance or RFD has been submitted.
- _____ All activities claimed for advance or reimbursements are included in the EHAP Standard Agreement.
- _____ Contractor Executive Officer and Fiscal Officer have both signed. Need original signatures.
- _____ Grant amount requested on Page 1 is correct.
- _____ Amount of Request on Page 1 matches total listed on Page 2, Column 3.
- _____ Page 2, Column 1, Approved Grant Amount: Must match Exhibit A of Standard Agreement.
- _____ Page 2, Column 2, Amount Previously Disbursed: Check against last RFD. If this is the first draw request, this column will be blank.
- _____ Page 2, Column 4, Total Requested and Drawdown amounts do not exceed the Standard Agreement amounts.
- _____ Page 3 subtotals and totals for 'Activity to which charged' are accurate and are carried forward to Page 2. Check all expenditures for eligibility and that they have been spent within the contract period.
- _____ RFD is mathematically correct and complete.